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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 5767

SERIAL NUMBER 10/666,847	FILING OR 371(c) DATE 09/18/2003 RULE	CLASS 713	GROUP ART UNIT 2132	ATTORNEY DOCKET NO. APLE.P0011
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/11/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

## ADDRESS

62224

## TITLE

METHOD AND APPARATUS FOR INCREMENTAL CODE SIGNING

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